

Docket No. CAU-101XC1

DECLARATION (37 CFR 1.63) AND POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name; and

I believe that I am the original, first, and sole inventor (if only one name is listed below), or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled Spinal Disc Annulus Reconstruction Method And Spinal Disc Annulus Stent the specification for which

☒ is attached hereto.

☐ was filed _____, Serial No. _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code §119 and/or §365 of any foreign application(s) for patent or inventor's certificate listed below and have also identified any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Application Serial No.	Country	Filing Date	Priority Claimed
60/160,710	United States	October 20, 1999	Yes

I hereby claim priority benefits under Title 35, United States Code §119 of any provisional application(s) for patent listed below:

Application Serial No.	Filing Date	Priority Claimed
---------------------------	-------------	------------------

I hereby claim the benefit under Title 35, United States Code, §120 and/or §365 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which became available between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status (Patented, Pending, Abandoned)
---------------------------	-------------	--

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

I hereby appoint the following persons registered to practice before the Patent and Trademark Office as my attorneys with full power of substitution and revocation to prosecute this application and all divisions and continuations thereof and to transact all business in the Patent and Trademark Office connected therewith: David R. Saliwanchik, Reg. No. 31,794; Jeff Lloyd, Reg. No. 35,389; Doran R. Pace, Reg. No. 38,261; Christine Q. McLeod, Reg. No. 36,213; Jay M. Sanders, Reg. No. 39,355; James S. Parker, Reg. No. 40,119; Jean Kyle, Reg. No. 36,987; Frank C. Eisenschenk, Reg. No. 45,332; Seth M. Blum, Reg. No. P-45,489.

I request that all correspondence be sent to:

Seth M. Blum
Saliwanchik, Lloyd & Saliwanchik
2421 N.W. 41st Street, Suite A-1
Gainesville, FL 32606-6669

I further request that all telephone communications be directed to:

Seth M. Blum
352-375-8100

cket No. CAU-101XC1

Name of First or Sole Inventor Joseph C. Cauthen

Residence Gainesville, Florida Citizenship United States

Post Office Address 6510 N.W. 9th Blvd., Suite One

Gainesville, FL 32605

Joseph C Cauthen

Date 1/18/00

Signature of First or Sole Inventor

Name of Second Joint Inventor _____

Residence _____ Citizenship _____

Post Office Address _____

Date _____

Signature of Second Joint Inventor

Name of Third Joint Inventor _____

Residence _____ Citizenship _____

Post Office Address _____

Date _____

Signature of Third Joint Inventor

Name of Fourth Joint Inventor _____

Residence _____ Citizenship _____

Post Office Address _____

Date _____

Signature of Fourth Joint Inventor

I hereby certify that this paper is being
Facsimile transmitted to the Patent and

Trademark Office on 13 Jan 2002

Patent Application
Docket No. CAU-101XCD1


Seth M. Blum, Patent Attorney

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner : U. Chattapadhyay
Art Unit : 3738
Applicant : Joseph C. Cauthen
Serial No. : 09/947,078
Filed : September 5, 2001
For : Spinal Disc Annulus Reconstruction Method and Spinal Disc Annulus Stent

Assistant Commissioner for Patents
Washington, D.C. 20231

ASSOCIATE POWER OF ATTORNEY

Sir:

I hereby appoint John A. Rissman, Registration No. 33,764, of the firm of Finnegan, Henderson, Farabow, Garrett & Dunner, L.L.P., 55 Cambridge Pkwy., 7th Fl., Cambridge, MA 02142, Phone: 617-452-1640; Facsimile 617-454-1666 and Keith MacMillan, Registration No. 47,212, of the firm of Finnegan, Henderson, Farabow, Garrett & Dunner, L.L.P., 1300 I Street N.W., Washington, D.C. 20005, Phone: 202-408-4035; Facsimile: 202-408-4400 and Eric Raciti, Registration No. 41,475, of the firm of Finnegan, Henderson, Farabow, Garrett & Dunner, L.L.P., 1300 I Street N.W., Washington, D.C. 20005, Phone: 202-408-4029; Facsimile: 202-408-4400 and Robert C. Beck, Registration No. 28,184, Beck & Tysver, P.L.L.C., 2900 Thomas Avenue South, Suite 100, Minneapolis, MN 55416-4477, Phone: 612-915-9635, Facsimile: 612-915-9637 as my associates to prosecute this application, to make alterations and amendments therein, and to transact all business in the Patent and Trademark Office connected therewith; and request that all correspondence be sent to: Seth M. Blum, Saliwanchik, Lloyd & Saliwanchik, 2421 N.W. 41st Street, Suite A-1, Gainesville, FL 32606, Phone (407) 426-7500.

Respectfully submitted,

Edw M Allen

Seth M. Blum, Patent Attorney

Registration No. 45,489

Phone No.: 407-426-7500

FAX No.: 407-839-8589

Address : 2421 N.W. 41st Street

Suite A-1

Gainesville, FL 32606